

# **Force Health Protection Brief**











#### **Indonesia**

**Historical diseases present in area:** Diarrheal diseases, Typhoid, Hepatitis A, Malaria, Dengue Fever, Tuberculosis (TB), Chikungunya Fever, Japanese Encephalitis (JE), Shistosomiasis, and Rabies.

**Recent Disease Reports:** Travelers' Diarrhea, JE, Avian Influenza H5N1, HIV, Shistosomiasis, Malaria, and Dengue Fever.

**Force Health Protection Requirements:** Up-to-date immunizations, anti-malarial protocols, JE vaccination required for RON personnel, day and night time insect precautions, Pre/Post Deployment PPD if staying more than one month, and use approved food and water sources.

**Medical infrastructure:** Hospitals are not equivalent to Western standards. For severe illness or injuries utilize Commander 7th Fleet Annex "Q" requirements for medical treatment.

**Environmental Hazards:** Avoid congested areas due to TB.

**Assessment: Moderate health risk to operational forces.** 



# Required Health Measures



- Immunizations
- Malaria chemoprophylaxis
- Mosquito & insect bite prevention
- Pre-mission health assessment
  - Include pre- and post-visit Tuberculosis (TB) screening test if staying more than one month
- Obtain personal medication



# Required Immunizations



- Start vaccinations early to accommodate vaccines that require several doses within a series
- Mission-specific:
  - Hepatitis B\*/\*\*
  - Typhoid
  - JapaneseEncephalitis\*\*
  - Rabies\*\*

- Routine:
  - Tetanus/diphtheria
  - Measles (MMR)
  - Polio
  - Varicella (chicken pox)
  - H1N1 Influenza
  - Seasonal Influenza
  - Hepatitis A

<sup>\*</sup> Required for health care providers

<sup>\*\*</sup> For high risk groups only – obtain specific guidance





# **Indonesia Entry Requirements**

- Although yellow fever is not a disease risk in Indonesia, the government requires travelers ≥9 months of age arriving from countries with risk of yellow fever transmission (see guidance for countries in Africa, Central and South America) to present proof of yellow fever vaccination.
- Example of Yellow Fever card.

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### POINTS OF CONTACT

- International SOS/TRICARE Operations Coordinator
  - Tel: +65-6338-9277 (Singapore)
  - Email: <u>tricarelon@internationalsos.com</u>
- TRICARE Area Office Pacific
  - COMM: 011-81-6117-43-2036
  - Email: james.marron@med.navy.mil
  - Website: <u>www.tricare.mil/contactus/</u>
- United States Naval Forces Seventh Fleet Surgeon Liaison Officer
  - COMM: 808-653-2121
  - DSN: 315-453-2121
  - Email: <u>leticia.macias@c7f.navy.mil</u>











**Food stands** 

Fruits & veggies (unless peeled/cooked)

Raw meat or fish

**Drinking water other than bottled** 

Local lakes/ponds











# **Personal Hygiene**

Frequency: 5 times/day

# **Timing:**

**BEFORE** eating

**BEFORE** smoking

**AFTER bathroom** 







# **Avoiding Insect Bites**

- Cover up
  - Long sleeves/pants
- Insect repellent
  - Permethrin
  - DEET
- Sleeping
  - Keep bugs OUT
  - Bed nets, window screens





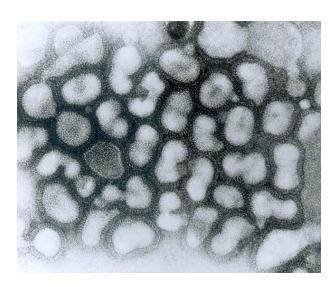




## **Avian Influenza**

- Causative Agent: Type "A" strains of influenza (flu) virus.
- Transmission: Contact with sick/dead poultry or contaminated surfaces.
- Common Symptoms: Fever, cough, sore throat, muscle aches, pneumonia, severe respiratory diseases, and other life-threatening complications.
- **Treatment:** Prescription antivirals (i.e., Tamilflu) should be effective for avian flu.
- Prevention: Wash hands before and after handling raw poultry and eggs, and cook poultry to 165 F.







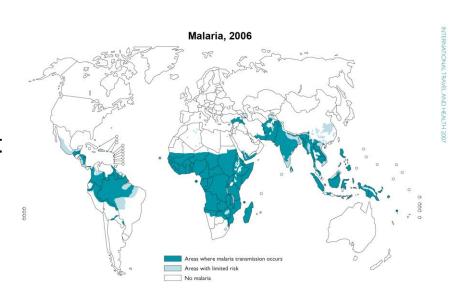


### **Malaria**

- Agent parasite, infects the blood cells.
- Transmission bite of an infected female mosquito.
- Signs/Symptoms Cycles of chills, fever, sweating, vomiting and yellowing (jaundice) of the skin/eyes.
- Prevention Insect skin repellent (DEET), antimalarial medications, permethrin treated bed nets/clothing and use of insecticides.











# Dengue and Dengue Hemorrhagic Fever

- Causative Agent: Virus (Flavivirus).
- Transmission: Bites of Aedes mosquitoes which are day biters.
- Symptoms: Fever, severe headache, backache, joint pains, nausea, vomiting, eye pain and rash.
- Treatment: Symptomatic treatment.
- Prevention: No vaccine available.
  Use insect skin repellent (DEET),
  permethrin treated bed nets/clothing,
  and use insecticides.







# **Vector-borne Disease:** Countermeasures



# **INSECT REPELLENTS FOR SKIN AND CLOTHING**

#### **DEET lotion**



NSN 6840-01-284-3982



Apply a thin coat to EXPOSED skin

One application lasts up to 12 hours

#### **Permethrin**

- •Individual Dynamic **Absorption Kit (IDA)**
- Treatment lasts for for over 50 launderings



#### NSN 6840-01-345-0237

- Aerosol spray can
- Treatment lasts through 5-6 washes

#### NSN 6840-01-278-1336

# PERSONAL PROTECTIVE **MEASURES**



YOU NEED TO KNOW... Dry cleaning removes permethrin from the uniform





### Travelers' Diarrhea



- **Transmission:** Various; tainted food and water, poor sanitation.
- Signs/Symptoms: Abdominal cramping/pain, fever, and loose watery stools lasting 3-4 days.
- Prevention: Avoid local water, no raw or undercooked food, peel all fruits/veggies, avoid street vendors, and wash hands with soap prior to eating.
- Treatment: Antibiotics for bacterial infection (see health care provider) and Imodium AD (Loperamide). Do not take Imodium if you have blood in your stool.

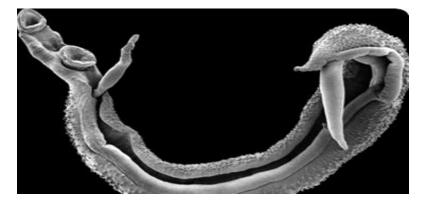


## **Force Health Protection**



### **Schistosomiasis**

- Causative Agent: Parasitic worms (Schistosoma spp.).
- Transmission: Skin contact with contaminated freshwater containing snail species that carry the schistosomes.
- Symptoms: Within days: rash or itchy skin.
  Within 1-2 months: chills, fever, cough, and
  muscle aches. Long-term infection can have
  serious consequences including organ
  damage, seizures, and paralysis.
- Treatment: Anti-parasitic drugs.
- Prevention: No vaccine available. Avoid swimming in freshwater in areas where schistosomiasis occurs. Use safe drinking water practices and clean water for bathing.



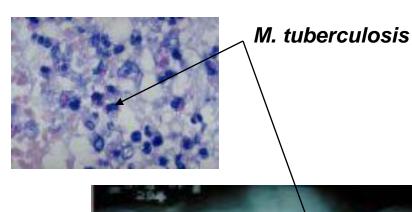


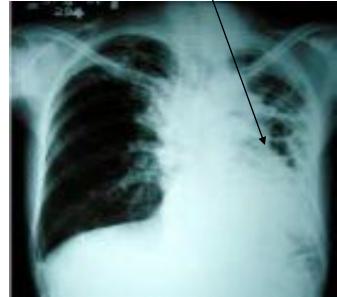




# **Tuberculosis (TB)**

- Causative Agent: Bacteria (Mycobacterium tuberculosis).
- Transmission: Airborne droplet via respiration.
- Symptoms: Cough, fatigue, night sweats, fever and rapid heart rate.
- Treatment: Antibiotics (some strains resistant to multiple drugs) and respiratory isolation.
- Prevention: No vaccine available. Avoid contact with persons with active TB, congested areas, and receive annual screening (PPD).









# **Sexually Transmitted Disease**

HIGH RISK FOR STDs - Hepatitis B, HIV, etc.

# **FHP Requirements**

- Avoid sexual contact.
- Use latex condoms if sexually active.
- Use Condom Sense!



\*STD diseases can be transmitted by tattoo needles.





### **Local Animals**

- Many countries have NO rabies control programs!
- Do not feed or attempt to touch animals.
- Report bites immediately.
- No mascots!

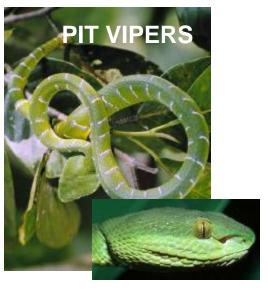




# **VENOMOUS SNAKES**







#### COBRAS/KRAITS/CORAL SNAKES

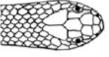


Short fangs fixed in erect position in front of mouth



Round eye pupils.





Head small and not distinct from the body.

#### **PIT VIPERS**



Long, hinged fangs that tuck into roof of mouth when not in use.



Vertically elliptical eye pupils; pit vipers with heat sensing organ between eye and nostril.



Broad triangular head very distinct from narrow neck.









# **HAZARDOUS PLANTS**



- Plant resins cause skin irritation
- Poisonous roots, stems, leaves, and fruit
- Weeds and stinging nettles
- Thorny shrubs and trees

#### **Poisonous Plants**



Mucuna pruritum

**Systemic Poison** 





**Thorny Plant** 

Irritation

**Punctures and Abrasions** 

### COUNTERMEASURES

- Avoid touching unfamiliar plants
- Use clothing as protective barrier
- Rinse skin promptly after exposure
- Wash clothing after contact
- Never eat any part of unfamiliar plant



# **Questions?**



- Please contact your local health care provider
- Navy Environmental and Preventive Medicine Unit No. 6
   Duty Phone: 808-471-0237
   nepmu6admin@med.navy.mil
- Navy Environmental and Preventive Medicine Unit No. 5
   Duty Phone: 619-556-7070
   nepmu5@med.navy.mil